EUROPEAN UNION **INTRA**

Part I: Description of consignment

I.1. Consignor
Name
Address
Country ISO Code

I.2. IMSOC reference

I.2.a. Local reference

I.3. Central Competent Authority

I.4. Local Competent Authority

I.5. Consignee
Name
Address
Country ISO Code

I.6. Operator conducting assembly operations independently of an establishment
Name
Address
Approval Number
Country ISO Code

I.7. Country of origin ISO Code

I.9. Country of destination ISO Code

I.8. Region of origin Code

I.10. Region of destination Code

I.11. Place of dispatch
Name
Address
Approval Number
Country ISO Code

I.12. Place of destination
Name
Address
Approval Number
Country ISO Code

I.13. Place of loading
Name
Address
Approval Number
Country ISO Code

I.14. Date and time of departure

I.15. Means of Transport

Mode	International transport document	Identification

I.16. Transporter
Name
Address
Activity ID
Country ISO Code

I.17. Accompanying documents
Commercial document reference
Date of issue
Country
Place of issue

I.18. Transport conditions
Frozen ☐ Chilled ☐ Ambient ☐

I.19. Container No / Seal No

I.20. Certified as
Germinal products ☐

I.21. For transit through a third country ☐
Third country ISO Code
Exit point BCP code
Entry point BCP code

I.22. For transit through Member State(s) ☐
Member State ISO Code

I.23. For export ☐
Third country ISO Code
Exit point BCP code

I.25. Journey Log

I.26. Total number of packages

I.27. Total quantity

I.28. Total gross weight

I.30. Description of consignment

Commodity	Species	Identification Number	Quantity	Nature of commodity

Identification Mark	Package count	Date of collection / production	Plant / Establishment / Centre	Type

Part II: Certification

II. Health information

I, the undersigned official veterinarian, hereby certify that:

II.1. The ova/embryos(1) described in Part I:

II.1.1. were collected, processed and stored under conditions which meet the requirements of Directive 92/65/EEC;

II.1.2. come from donor female swine which meet the requirements of Chapter IV of Annex D to Directive 92/65/EEC;

II.1.3. meet the requirements of Chapter III of Annex D to Directive 92/65/EEC.

(1)either ☐ [II.2. In the case of embryos,

II.2.1. the semen used for fertilisation meets the requirements of Directive 90/429/EEC;

II.2.2. the embryos have been washed with trypsin(2).]

(1) ☐ or [II.2. In the case of ova, the ova comes from a donor female swine which meets the conditions of Article 1 of Decision 2008/185/EC(2).]

Notes

This animal health certificate shall be completed according to the notes for the completion of certificates provided for in Chapter 2 of Annex I to Commission Implementing Regulation (EU) 2020/2235.

Part I:

Box I.11: Place of destination shall correspond to the embryo collection team of oocytes/embryos collection.

Box I.12: Place of destination shall correspond to the embryo collection team, embryo production team, germinal product processing establishment, germinal product storage centre or to the establishment of oocytes/embryos destination.

Box I.19: Identification of container and Seal number shall be indicated.

Box I.30: "Type": specify if: in vivo derived embryos, in vivo derived oocytes, in vitro produced embryos or micromanipulated embryos.

Identification number shall correspond to the official identification of the animal.

Date of collection shall be indicated in the following format: dd/mm/yyyy.

Approval number of the team shall correspond to the embryo collection team of oocytes/embryos collection indicated in Box I.11.

Part II:

(1) Delete as appropriate.

(2) This condition applies only to ova and embryos which originate in the Member States or regions thereof not listed in Annexes I and II to Decision 2008/185/EC (OJ L 59, 4.3.2008, p. 19) and destined to the Member States or regions thereof so listed. It shall also apply to movements from Member States or regions thereof listed in Annex II of Decision 2008/185/EC to Member States or regions thereof listed in Annex I of Decision 2008/185/EC.

Certifying Officer/Official veterinarian

Name (in capital letters) Authority name

Date of signature Signature

Stamp